Department of Accounts Payroll Bulletin

Calendar Year 2004 May 24, 2004 Volume 2004-03

PAYROLL PROCESSING - FISCAL YEAR-END 2004

Introduction

This Payroll Bulletin addresses payroll processing for Fiscal Year-End 2004, Fiscal Year 2005 benefit rates (including healthcare rate tables), and the June - November 2004 payroll operations calendar. Please provide a copy of this bulletin to all appropriate personnel within your agency.

Key Payroll Operations Dates During June 2004

- **June 14** Healthcare reconciliations and related IATs are due to DOA for the May coverage month.
- June 16 and June 17 Certification dates for non-salaried and special payrolls that will post to FY2004. All payrolls certified after June 17 will post to FY2005. See Payroll Expenditures section of this bulletin.

Payroll Expenditures

Salaried payroll expenditures for the June 10 - 24 pay period (July 1, 2004 payday) will be charged to FY2005 without exception. CARS postings for this payday will be controlled by DOA. To execute this requirement, all payrolls certified on June 18, 2004 or later will be charged to FY2005.

Pays certified on June 16 and 17 will be charged to FY2004. These payruns are for non-salaried (e.g., hourly) and special payrolls only. Salaried payroll certifications for the period ending June 24th will not be permitted on these dates. If you plan to certify on either of these dates, contact Annie Callanta, via e-mail acallanta@doa.state.va.us or (804) 371-7799.

In This Issue of the Payroll Bulletin

- 1. Payroll Processing Fiscal Year End
- 2. Benefit Deduction Rate Changes
- 3. FY 2005 Healthcare Rate Tables
- 4. Payroll Operations Calendar June November 2004

The Payroll Bulletin is published periodically to provide CIPPS agencies guidance regarding Commonwealth payroll operations. If you have any questions about the bulletin, please call Lora George at (804) 225-2245 or Email at:

Lgeorge@doa.state.va.us

State Payroll Operations

Manager

Lora L. George

Assistant Manager

Allison B. Patrick

Continued on next page

PAYROLL PROCESSING - FISCAL YEAR-END 2004, continued

"P" and "N" Vouchers

Agencies are not required to use the "P" or "N" on payroll vouchers processed through CIPPS. CIPPS payrolls post to CARS as a batch type 9, which does not require the "P/N" voucher process.

Flexible Benefits

Mass transactions to deactivate the flexible benefit deductions and zero the amount and goal field will be executed by DOA on June 30. Data entry of new flexible benefit deductions must be completed by agencies prior to calculating the 6/25-7/9 pay period.

VRS Rate Schedule

Effective with the June 25 - July 9 pay period (July 16, 2004 payday), contribution rates for VRS administered programs are at the rates listed below. No action is required by agencies. DOA will adjust the rates in CIPPS.

Benefit Name	Rate	Expenditure Code
Group Insurance (See note below)	0.00%	1114
Retiree Health Insurance Credit	1.04%	1116
Retirement-		
State employees	8.91%	1111
State Police	21.49%	1111
Judicial	35.55%	1111
VaLORS	21.99%	1111
Long-Term Disability-		
State employees	1.65%	1117
State Police	1.65%	1117
VaLORS	1.65%	1117

Note: Group Insurance (ded # 20) will be calculated in CIPPS at a rate of 0.80% and reported to VRS. However, there will be no charge posted to agency expenditures for FY2005.

PAYROLL PROCESSING - FISCAL YEAR-END 2004, continued

Optional Group Life Premium Update

Effective July 1, 2004 (July 16, 2004 payday), the Optional Group Life premium rates will be reduced to the amounts set forth in the table below. The rates are based on the age of the member or spouse on January 1, 2004.

Reports documenting the coverage and premium amounts will be distributed around the middle of June. The file to change the deduction 35 amounts will be loaded in on July 1. Be sure to review the Report U024, OPTIONAL GROUP LIFE PREMIUM LISTING, and Report U025, OPTIONAL GROUP LIFE ERROR REPORT, in sufficient time to identify and make any necessary adjustments prior to certification.

Age of Insured Member of Spouse	Current Rate	Rate Effective July 1	Effective Reduction
Under 30	\$.06	\$.06	0%
30-34	.08	.08	0%
35-39	.09	.09	0%
40-44	.13	.11	15.4%
45-49	.21	.17	19.0%
50-54	.37	.34	8.1%
55-59	.63	.59	6.3%
60-64	1.10	1.10	0%
65-69	1.95	1.95	0%
70-74	3.53	3.53	0%
75 & Over	3.76	3.76	0%

The process DOA uses to submit OGL (Optional Group Life) data and funds to Minnesota Life will change effective with the June 25 to July 09 pay period (July 16, 2004 payday). Currently deduction 35 amounts post in CARS to agency 158, transaction code 255, fund 0707. Effective July 1, deduction 35 amounts will be recorded in agency 997, GLA 551, transaction code 258. Deductions will be reflected on the U058, *CARS Payroll Transaction Recap*. However, OGL information will continue to appear on your VRS contribution worksheet, Report U016.

Questions regarding coverage or premiums should be directed to Joe Chang at Minnesota Life at:

Joe Chang. Richmond Branch Office joseph.chang@minnesotamutual.com Phone: 1-800-441-2258, ext. 101

Fax: 804-644-2460

Continued on next page

PAYROLL PROCESSING - FISCAL YEAR-END 2004, continued

Reduction in Optional Retirement Vendors Effective with the 6/10-6/24 pay period (July 1 payday), the Optional Retirement Plan options will be reduced to only include Fidelity and TIAA/CREF. Those agencies affected have been contacted by the Virginia Retirement System. Any participant whose retirement plan on HMCU1 continues to reflect a discontinued ORP retirement plan, will be changed to the default plan of Fidelity. DOA will execute a system-wide change for these discontinued plans (and associated deductions) on June 18, 2004.

Healthcare For Part-time Classified Employees Effective July 1, the State Health Plan will be offered to part-time state employees provided the employee pays the entire cost. Part-time state employees means classified or similarly situated employees in legislative, executive, judicial, or independent agencies who are compensated on a salaried basis and work at least 20 hours, but less than 32 hours, per week.

Coverage	CIPPS Value
Part time Employee Only	O
Part time Dual (Employee Plus One)	T
Part time Family	M

Healthcare Premium Schedules On July 1, 2004, the new healthcare premiums specified in DHRM's *Spotlight* March 2004 Open Enrollment Issue, and listed on pages 5-9 in this bulletin, will take effect.

The new Healthcare Premium schedules promulgated by DHRM are divided into two sections. The first section applies to active employees, the second to employees on LWOP. All healthcare providers are listed below and categorized alphabetically.

Provider	Active Provider Code	Involuntary Separation Provider Code	Project Code
COVA Care Basic	42	92	93002
COVA Care Out-of-Network (OON)	43	93	93002
COVA Care Expanded Dental (ED)	44	94	93002
COVA Care Out-of-Network and Expanded Dental (OON/ED)	45	95	93002
COVA Care Vision, Hearing and Expanded Dental (V/H/ED)	46	96	93002
COVA Care Out-of-Network and Vision, Hearing and Expanded Dental (Full)	47	97	93002
Kaiser Permanente HMO	06	56	93003

DOA will enter premium changes into CIPPS to become effective with the June 25 – July 9 pay period (July 16, 2004 payday) on July 1, 2004. DOA will automatically change these deductions for active employee deductions. If you have any questions about the schedules, contact Judi Ohde, via e-mail at johde@doa.state.va.us or (804) 225-2386.

Continued on next page

COVA Care Basic (BES – CC0)

Provider Code: 42/92

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$16.00	\$151.00	\$167.00	\$32.00	\$302.00	\$334.00
D - Employee Plus One	\$40.00	\$269.50	\$309.50	\$80.00	\$539.00	\$619.00
F - Family	\$56.50	\$395.00	\$451.50	\$113.00	\$790.00	\$903.00
O - Employee Only - Part Time	\$167.00	0.00	\$167.00	\$334.00	0.00	\$334.00
T - Employee Plus One - Part Time	\$309.50	0.00	\$309.50	\$619.00	0.00	\$619.00
M - Family - Part Time	\$451.50	0.00	\$451.50	\$903.00	0.00	\$903.00

COVA Care OON (BES – CC1)

Provider Code: 43/93

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$20.00	\$151.00	\$171.00	\$40.00	\$302.00	\$342.00
D - Employee Plus One	\$45.50	\$269.50	\$315.00	\$91.00	\$539.00	\$630.00
F – Family	\$63.50	\$395.00	\$458.50	\$127.00	\$790.00	\$917.00
O - Employee Only - Part Time	\$171.00	0.00	\$171.00	\$342.00	0.00	\$342.00
T - Employee Plus One - Part Time	\$315.00	0.00	\$315.00	\$630.00	0.00	\$630.00
M - Family - Part Time	\$458.50	0.00	\$458.50	\$917.00	0.00	\$917.00

COVA Care ED (BES – CC2)

Provider Code: 44/94

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$21.00	\$151.00	\$172.00	\$42.00	\$302.00	\$344.00
D - Employee Plus One	\$49.50	\$269.50	\$319.00	\$99.00	\$539.00	\$638.00
F – Family	\$71.50	\$395.00	\$466.50	\$143.00	\$790.00	\$933.00
O - Employee Only - Part Time	\$172.00	0.00	\$172.00	\$344.00	0.00	\$344.00
T - Employee Plus One - Part Time	\$319.00	0.00	\$319.00	\$638.00	0.00	\$638.00
M - Family - Part Time	\$466.50	0.00	\$466.50	\$933.00	0.00	\$933.00

COVA Care OON/ED (BES – CC3)

Provider Code: 45/95

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$25.00	\$151.00	\$176.00	\$50.00	\$302.00	\$352.00
D - Employee Plus One	\$55.00	\$269.50	\$324.50	\$110.00	\$539.00	\$649.00
F - Family	\$78.50	\$395.00	\$473.50	\$157.00	\$790.00	\$947.00
O - Employee Only - Part Time	\$176.00	0.00	\$176.00	\$352.00	0.00	\$352.00
T - Employee Plus One - Part Time	\$324.50	0.00	\$324.50	\$649.00	0.00	\$649.00
M - Family - Part Time	\$473.50	0.00	\$473.50	\$947.00	0.00	\$947.00

COVA Care V/H/ED (BES – CC4)

Provider Code: 46/96

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$24.50	\$151.00	\$175.50	\$49.00	\$302.00	\$351.00
D - Employee Plus One	\$56.00	\$269.50	\$325.50	\$112.00	\$539.00	\$651.00
F - Family	\$79.50	\$395.00	\$474.50	\$159.00	\$790.00	\$949.00
O - Employee Only - Part Time	\$175.50	0.00	\$175.50	\$351.00	0.00	\$351.00
T - Employee Plus One - Part Time	\$325.50	0.00	\$325.50	\$651.00	0.00	\$651.00
M - Family - Part Time	\$474.50	0.00	\$474.50	\$949.00	0.00	\$949.00

COVA Care FULL (BES – CC5)

Provider Code: 47/97

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$28.50	\$151.00	\$179.50	\$57.00	\$302.00	\$359.00
D - Employee Plus One	\$61.50	\$269.50	\$331.00	\$123.00	\$539.00	\$662.00
F - Family	\$86.50	\$395.00	\$481.50	\$173.00	\$790.00	\$963.00
O - Employee Only - Part Time	\$179.50	0.00	\$179.50	\$359.00	0.00	\$359.00
T - Employee Plus One - Part Time	\$331.00	0.00	\$331.00	\$662.00	0.00	\$662.00
M - Family - Part Time	\$481.50	0.00	\$481.50	\$963.00	0.00	\$963.00

KAISER PERMANENTE HMO (BES – KP)

Provider Code: 06/56

Employee Coverage Code

Semi-Monthly

Monthly

	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$17.50	\$151.00	\$168.50	\$35.00	\$302.00	\$337.00
D - Employee Plus One	\$42.00	\$269.50	\$311.50	\$84.00	\$539.00	\$623.00
F - Family	\$60.00	\$395.00	\$455.00	\$120.00	\$790.00	\$910.00
O - Employee Only - Part Time	\$168.50	0.00	\$168.50	\$337.00	0.00	\$337.00
T - Employee Plus One - Part Time	\$311.50	0.00	\$311.50	\$623.00	0.00	\$623.00
M - Family - Part Time	\$455.00	0.00	\$455.00	\$910.00	0.00	\$910.00

Leave Without Pay (LWOP)

Medical LWOP

For employees on LWOP due to medical leave, agency convenience, or layoffs, the employee is responsible for paying the employee share and the agency is responsible for paying the agency share of the healthcare premium. These employees will be identified as being on *Medical LWOP* on the following healthcare schedules.

Other LWOP

For employees on LWOP for other reasons (e.g., personal, education), the employee is responsible for the entire healthcare premium. These employees will be identified as being on *Non-Medical LWOP* on the following healthcare schedules.

Employees on military LWOP should contact DHRM's Office of Health Benefits for guidance.

Continued Coverage

For employees on LWOP electing to continue healthcare coverage, the agency is responsible for entering the appropriate Employee Coverage Code (See pages 8 – 9) on the HMCU1 screen in CIPPS. The agency will then pay the entire healthcare premium every month, with the employee reimbursing the agency for the amount determined by the employee's LWOP type (e.g., Medical or Non-Medical), provider code, and employee coverage code.

LWOP Healthcare Tables

On the following LWOP healthcare schedules, the **Agency Payment** refers to the amount initially paid by the agency (i.e. the full premium due) either through payroll deduction or the automated healthcare reconciliation process. **Employee Cost** refers to the amount the LWOP employee will reimburse the agency every month.

COVA Care Basic (BES – CC0)

Provider Code: 42

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
		LWOP		
SS - Employee Only	\$32.00	\$334.00	\$167.00	\$334.00
DD - Employee Plus One	\$80.00	\$619.00	\$309.50	\$619.00
FF - Family	\$113.00	\$903.00	\$451.50	\$903.00
OO - Employee Only - Part Time	\$334.00	\$334.00	\$167.00	\$334.00
TT - Employee Plus One - Part Time	\$619.00	\$619.00	\$309.50	\$619.00
MM - Family - Part Time	\$903.00	\$903.00	\$451.50	\$903.00

COVA Care OON (BES – CC1)

Provider Code: 43

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
		LWOP		
SS - Employee Only	\$40.00	\$342.00	\$171.00	\$342.00
DD - Employee Plus One	\$91.00	\$630.00	\$315.00	\$630.00
FF - Family	\$127.00	\$917.00	\$ <mark>458.</mark> 50	\$917.00
OO - Employee Only - Part Time	\$342.00	\$342.00	\$171.00	\$34 2.00
TT - Employee Plus One - Part Time	\$630.00	\$630.00	\$315.00	\$630.00
MM - Family - Part Time	\$917.00	\$917.00	\$458.50	\$917.00

COVA Care ED (BES – CC2)

Provider Code: 44

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
	# 12 00	LWOP	#172.00	#2.4.4.00
SS - Employee Only	\$42.00	\$344.00	\$172.00	\$344.00
DD - Employee Plus One	\$99.00	\$638.00	\$3 19.00	\$638.00
FF – Family	\$143.00	\$933.00	\$466.50	\$933.00
OO - Employee Only - Part Time	\$344.00	\$344.00	\$172.00	\$344.00
TT - Employee Plus One - Part Time	\$638.00	\$638.00	\$319.00	\$638.00
MM - Family - Part Time	\$933.00	\$933.00	\$466.50	\$933.00

COVA Care OON/ED (BES – CC3)

Provider Code: 45

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$50.00	\$352.00	\$176.00	\$352.00
DD - Employee Plus One	\$110.00	\$64 <mark>9.00</mark>	\$3 24.50	\$649.00
FF - Family	\$157.00	\$947.00	\$473.50	\$947.00
OO - Employee Only - Part Time	\$352.00	\$352.00	\$176.00	\$352.00
TT - Employee Plus One - Part Time	\$649.00	\$649.00	\$324.50	\$649.00
MM - Family - Part Time	\$947.00	\$947.00	\$473.50	\$947.00

COVA Care V/H/ED (BES – CC4)

Provider Code: 46

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
		LWOP		
SS - Employee Only	\$49.00	\$351.00	\$175.50	\$351.00
DD - Employee Plus One	\$112.00	\$651.00	\$325.50	\$651.00
FF - Family	\$159.00	\$949.00	\$474.50	\$949.00
OO - Employee Only - Part Time	\$351.00	\$351.00	\$175.50	\$351.00
TT - Employee Plus One - Part Time	\$651.00	\$651.00	\$325.50	\$651.00
MM - Family - Part Time	\$949.00	\$949.00	\$474.50	\$949.00

COVA Care Full (BES – CC5)

Provider Code: 47

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
		LWOP		
SS - Employee Only	\$57.00	\$359.00	\$179.50	\$359.00
DD - Employee Plus One	\$123.00	\$662.00	\$331.00	\$662.00
FF - Family	\$173.00	\$963.00	\$481.50	\$963.00
OO - Employee Only - Part Time	\$359.00	\$359.00	\$179.50	\$359.00
TT - Employee Plus One - Part Time	\$662.00	\$662.00	\$331.00	\$662.00
MM - Family - Part Time	\$963.00	\$963.00	\$481.50	\$963.00

KAISER PERMANENTE (BES – KP)

Provider Code: 06

Employee Coverage Code

Employee Cost (Monthly)

Agency Payment

	Medical LWOP	Non-Medical	Semi-Monthly	Monthly
		LWOP		
SS - Employee Only	\$35.00	\$337.00	\$168.50	\$337.00
DD - Employee Plus One	\$84.00	\$623.00	\$311.50	\$623.00
FF - Family	\$120.00	\$910.00	\$455.00	\$910.00
OO - Employee Only - Part Time	\$337.00	\$337.00	\$168.50	\$337.00
TT - Employee Plus One - Part Time	\$623.00	\$623.00	\$311.50	\$623.00
MM - Family - Part Time	\$910.00	\$910.00	\$455.00	\$910.00

June 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 Payday for semimonthly salaried employees	2	3	4	5 9AM - CIPPS files open - no edits or payruns
6 9AM - CIPPS files open - no edits or payruns	7	8	9	Semimonthly salaried certification deadline period #1-(5/25-6/09)	11	9AM - CIPPS files open - no edits or payruns
9AM - CIPPS files open - no edits or payruns	Leave keying deadline (5/10-5/24) Post leave accruals (5/25-6/09)	15	16 Payday for semimonthly salaried employees	17	18	19 9AM - CIPPS files open - no edits or payruns
	May Healthcare Cert CHARGE FY 2004	CHARGE FY 2004	CHARGE FY 2004	CHARGE FY 2004	Starting this day CHARGE FY 2005	
9AM - CIPPS files open - no edits or payruns	21	22	23	24	25 Semimonthly salaried certification deadline period #2- (6/10-6/24)	26 9AM - CIPPS files open - no edits or payruns
27 9AM - CIPPS files open - no edits or payruns	28	29 Leave keying deadline (5/25-6/09) Post leave accruals (6/10-6/24) Fiscal Year End Leave Processing (Leave Liability)	30			

July 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 Payday for semimonthly salaried employees	2	3 9AM –CIPPS files open-no edits or payruns
4 9AM –CIPPS files open-no edits or payruns	5 HOLIDAY	6	7	8	9 2 nd Qtr. Recon of taxable wages due to DOA	10 9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	12 Semimonthly salaried certification Period 1-(6/25-7/9)	13	14 Leave keying deadline (6/10-6/24) Post leave accruals - (6/25-7/9)	15	16 Payday for semimonthly salaried employees	17 9AM –CIPPS files open-no edits or payruns
18 9AM –CIPPS files open-no edits or payruns	19	20	21	22	23	9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	26 Semimonthly salaried certification Period 2-(7/10-7/24)	27	28 Leave keying Deadline (6/25-7/9) Post leave accruals - (7/10-7/24)	29	Payday for semimonthly salaried employees June HC Certification due	9AM –CIPPS files open-no edits or payruns

August 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1 9AM –CIPPS files open-no edits or payruns	2	3	4	5	6	7 9AM –CIPPS files open-no edits or payruns
8 9AM –CIPPS files open-no edits or payruns	9	10 Semimonthly salaried certification deadline period #1-(7/25- 8/9)	11	Leave keying deadline (7/10-7/24) Post leave accruals - (7/25-8/9)	13	14 9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	16 Payday for semimonthly salaried employees	17	18	19	20	21 9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	23	24	25	26 Semimonthly salaried certification period#2-(8/10-8/24)	27	28 9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	30 Leave keying Deadline (7/25-8/9) Post leave accruals - (8/10-8/24)	July HC Certification due				

September 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 Payday for semimonthly salaried employees	2	3	4 9AM –CIPPS files open-no edits or payruns
5 9AM –CIPPS files open-no edits or payruns	6 HOLIDAY	7	8	9	10 Semimonthly salaried certification deadline period #1-(8/25-9/9)	9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	13	14 Leave keying deadline (8/10-8/24) Post leave accruals - (8/25-9/9)	15	16 Payday for semimonthly salaried employees	17	18 9AM –CIPPS files open-no edits or payruns
19 9AM –CIPPS files open-no edits or payruns	20	21	22	23	24 Semimonthly salaried certification period# 2-(9/10- 9/24)	25 9AM –CIPPS files open-no edits or payruns
26 9AM –CIPPS files open-no edits or payruns	27	28 Leave keying Deadline (8/25-9/9) Post leave accruals 9/10-9/24)	29	30 Payday for semimonthly salaried employees August HC Certification due		

October 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2 9AM –CIPPS files open-no edits or payruns
3 9AM –CIPPS files open-no edits or payruns	4	5	6	7	8 Semimonthly salaried certification deadline period #1-(9/25- 10/9)	9 9AM –CIPPS files open-no edits or payruns
10 9AM –CIPPS files open-no edits or payruns	11 HOLIDAY	12	Leave keying Deadline (9/10-9/24) Post leave accruals - (9/25-10/9)	3 rd Qtr Recon of taxable wages due to DOA.	Payday for semimonthly salaried employees	16 9AM –CIPPS files open-no edits or payruns
17 9AM –CIPPS files open-no edits or payruns	18	19	20	21	22	23 9AM –CIPPS files open-no edits or payruns
24 9AM –CIPPS files open-no edits or payruns	25	26 Semimonthly salaried certification period#2- (10/10-10/24)	27	28 Leave keying Deadline (9/25-10/9) Post leave accruals (10/10-10/24)	29 September HC Certification due	30 9AM –CIPPS files open-no edits or payruns
31 9AM –CIPPS files open-no edits or payruns						

November 2004

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 Payday for semimonthly salaried employees	2	3	4	5	6 9AM –CIPPS files open-no edits or payruns
7 9AM –CIPPS files open-no edits or payruns	8	9 Semimonthly salaried certification deadline period #1 (10/25- 11/9)	10	11 HOLIDAY	Leave keying deadline (10/10-10/24 Post leave accruals (10/25-11/9)	9AM –CIPPS files open-no edits or payruns
14 9AM –CIPPS files open-no edits or payruns	15	16 Payday for semimonthly salaried employees	17	18	19	20 9AM –CIPPS files open-no edits or payruns
9AM –CIPPS files open-no edits or payruns	22	Semimonthly salaried certification period 2-(11/10-11/24)	24	25 HOLIDAY	HOLIDAY	9AM –CIPPS files open-no edits or payruns
28 9AM –CIPPS files open-no edits or payruns	Leave keying Deadline (10/25- 11/9) Post leave accruals (11/10-11/24) October HC Certification due	30				